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CONFIRMATION NO. 6402

Bib Data Sheet

SERIAL NUMBER 10/815,457	FILING OR 371(c) DATE 04/01/2004 RULE	CLASS 707	GROUP ART UNIT 2195	ATTORNEY DOCKET NO. 13913- 194001/2004P00047 U
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** CONTINUING DATA *****

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** FOREIGN APPLICATIONS *****

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IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 06/17/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after	GERMANY	33	20	3
Verified and Acknowledged	Allowance <i>Mary E. H.</i> <i>TL</i> Examiner's Signature Initials				

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32864

TITLE

Context resolution

FILING FEE RECEIVED 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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